



17º CONGRESSO BRASILEIRO DE GASTROENTEROLOGIA PEDIÁTRICA

Construindo pontes entre a ciência e o cuidado

PORTO DE GALINHAS - PERNAMBUCO

Trabalhos Científicos

Título: Gastroesophageal Dysmotility And Feeding Difficulties In An Infant With Congenital Zika Syndrome: A Case Report.

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Resumo: Objetivo(s) to report a case of gastroesophageal dysmotility and feeding difficulties in an infant with Congenital Zika Syndrome(CZS). Método it is a case report, based on based on medical records. Resultados a male infant, 18 months old, presented with a history of weight loss and progressive feeding difficulty:dysphagia for liquids and solids and postprandial vomits. The patient had been diagnosed with CZS and Congenital Heart Disease. He was receiving phenobarbital, captopril and furosemide, with good control of epilepsy and cardiac disease. Unlike most infants with CZS, the patient had relative preservation of interaction and comprehension skills. Patient was admitted to hospital for nutritional support (with the insertion of a nasogastric tube)and to start treatment for gastroesophageal reflux disease. Despite an initial nutritional recovery, vomits persisted even with maximum doses of ranitidine and domperidone. Modifications in the therapeutic scheme were attempted:omeprazole, erythromycin, cyproheptadine, metoclopramide and even dietary modifications(soy protein-based and extensively hydrolyzed formula). They all only promoted a partial response. During his hospitalization, he stopped the weight gain and had two episodes of respiratory infections(pneumonia and sinusitis). Neurosurgical evaluation excluded intracranial hypertension as the etiology of vomits. An upper gastrointestinal series (UGI) was performed and revealed a delay in the esophagogastric transit, with segmental ectasias and signs of contents in stasis. Also, a Gastric Emptying Scintigraphy revealed a very slow gastric transit (166 minutes). No signs of pulmonary aspiration were detected. At the age of 22 months, an endoscopic gastrostomy was performed. Since then,the vomit condition and the weight gain has improved progressively. He was discharged using a hypercaloric cow's milk-based formula, along with ranitidine, domperidone and cyproheptadine.He will continue to have multidisciplinary outpatient care. conclusão(ões) the CZS is new and unique and, up to now, only part of the children injured clinically present gastrointestinal alterations. As reported here, the severity of dysmotility may be disproportionate to the neurological damage and be associated with feeding difficulties and nutritional impairment. As this occurs in an early stage of life, the damage to growth and development may be irreversible. As a new disease, future large studies are needed to better evaluate the association between CZS and gastroesophageal motility.